

CASE NO. 476-1855.1

Nortel

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receipt of the

enclosed:

**John E. Hudson**

Wireless Communications System and Method Therefore

SERIAL NO: To be assigned

FILING DATE: Herewith

1. Utility Patent Application Transmittal for Continuation-in-Part Application
2. Fee Transmittal for FY 1999 in duplicate
3. Amendment Accompanying Application
4. Check No. 41165 for \$1454.00
5. Specification with six (6) sheets of drawings
6. Certificate of EXPRESS MAIL.
7. Return Post Card.

DUE DATE: New Application

DATE SENT: October 16, 2000  
WJR:lmb

jc921 U.S. PTO  
09/688557  
10/16/00



"Express Mail" mailing label number

EL 700 383 661 US

Date of deposit: October 16, 2000

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Richard Sensenbrenner

(Typed or printed name of person mailing paper or fee)

Richard Sensenbrenner

(Signature of person mailing paper or fee)

10/16/00  
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JULY 2000

10/11/04 8:00

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PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

*(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))*

*Attorney Docket No.* 476-1855.1

*First Inventor or Application Identifier* Hudson

## Title: Wireless Communications System and Method Therefor

*Express Mail Label No.* E1 700 383 661 US

## **APPLICATION ELEMENTS**

*See MPEP chapter 600 concerning utility patent application contents.*

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

- |                                       |   |
|---------------------------------------|---|
| 1.                                    | <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original and a duplicate for fee processing)</i>  |
| 2.                                    | <input checked="" type="checkbox"/> Specification [Total Pages <b>32</b> ]<br><ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (<i>if filed</i>)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> |
| 3.                                    | <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>6</b> ]   |
| 4.                                    | Oath or Declaration [Total Pages <b>  </b> ]<br><ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))<br/><i>(for continuation/divisional with Box 16 completed)</i></li> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li> </ul>   |
| 5.                                    | <input type="checkbox"/> Microfiche Computer Program ( <i>Appendix</i> )  |
| 6.                                    | Nucleotide and/or Amino Acid Sequence Submission<br><i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul>   |
| <b>ACCOMPANYING APPLICATION PARTS</b> |   |
| 7.                                    | <input type="checkbox"/> Assignment Papers (cover sheet & document(s))  |
| 8.                                    | <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of<br><i>(when there is an assignee)</i> <input type="checkbox"/> Attorney  |
| 9.                                    | <input type="checkbox"/> English Translation Document ( <i>if applicable</i> )  |
| 10.                                   | <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations   |
| 11.                                   | <input type="checkbox"/> Preliminary Amendment  |
| 12.                                   | <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i>  |
| 13.                                   | <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired  |
| 14.                                   | <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i>  |
| 15.                                   | <input type="checkbox"/> Other _____  |

**\* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation     Divisional     Continuation-in-part (CIP)    of prior application No: 09/419,211

*Prior application information:* Examiner *Group / Art Unit:* 2737  
**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application.

#### **17. CORRESPONDENCE ADDRESS**

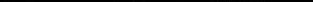
Customer Number or Bar Code Label      or  Correspondence address below

*(Insert Customer No. or Attach bar code label here)*

Lee, Mann, Shi

*Address* P.O. Box 2786

**City** Chicago **State** Illinois **Zip Code** 60690-2786  
**Country** USA **Phone** (312) 266-1200 **Fax** (312) 266-2222

Name (Print/Type)	Peter J. Shakula	Registration No. (Attorney/Agent)	40,808
Signature			Date 10/16/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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# FEE TRANSMITTAL for FY 1999

*Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.*

TOTAL AMOUNT OF PAYMENT	(\$ 1454)
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*Complete if Known*

Application Number	
Filing Date	
First Named Inventor	Hudson
Examiner Name	
Group / Art Unit	
Attorney Docket No.	476-1855.1

**METHOD OF PAYMENT** (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number  
Deposit Account Name  
**Lee, Mann, Smith, McWilliams,  
Sweeney & Ohlson**

Charge Any Additional Fee Required Under  
37 CFR 1.16 and 1.17

2.  Payment Enclosed:

Check     Money Order     Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101	760	201 380 Utility filing fee	710
106	310	206 155 Design filing fee	
107	480	207 240 Plant filing fee	
108	760	208 380 Reissue filing fee	
114	150	214 75 Provisional filing fee	

**SUBTOTAL (1) (\$ 710)**

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
48	-20** = 28	X 18	= 504
Independent Claims	6	-3** = 3	X 80 = 240
Multiple Dependent			

\*\*or number previously paid, if greater; For Reissues, see below

**Large Entity Small Entity**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	78	202 39 Independent claims in excess of 3
104	260	204 130 Multiple dependent claim, if not paid
109	78	209 39 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$ 744)**

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	380	216 190 Extension for reply within second month	
117	870	217 435 Extension for reply within third month	
118	1,360	218 680 Extension for reply within fourth month	
128	1,850	228 925 Extension for reply within fifth month	
119	300	219 150 Notice of Appeal	
120	300	220 150 Filing a brief in support of an appeal	
121	260	221 130 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,210	241 605 Petition to revive - unintentional	
142	1,210	242 605 Utility issue fee (or reissue)	
143	430	243 215 Design issue fee	
144	580	244 290 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Petitions related to provisional applications	
126	240	126 240 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	
146	760	246 380 Filing a submission after final rejection (37 CFR 1.129(a))	
149	760	249 380 For each additional invention to be examined (37 CFR 1.129(b))	

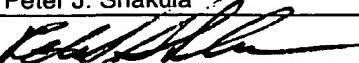
Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3) (\$ 0)**

\* Reduced by Basic Filing Fee Paid

**SUBMITTED BY**

Typed or Printed Name	Peter J. Shakula	Complete (if applicable)
Signature		Reg. Number 40,808
	Date 1016/00	Deposit Account User ID

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10/16/00